

118TH CONGRESS
1ST SESSION

H. R. 3011

To establish a task force of the Department of Defense on mental health.

IN THE HOUSE OF REPRESENTATIVES

APRIL 28, 2023

Mr. KILMER (for himself, Mr. WITTMAN, Ms. HOULAHAN, Mr. RESCHENTHALER, Ms. NORTON, Mr. STEWART, Mr. RYAN, Mr. NICKEI, Mr. KELLY of Mississippi, Ms. SHERRILL, Mr. TONKO, Ms. WILD, Mr. WOMACK, Mr. BISHOP of Georgia, Mr. FITZPATRICK, Ms. MCCOLLUM, Mrs. McCLELLAN, Ms. TITUS, Mr. SCOTT of Virginia, and Mr. NORCROSS) introduced the following bill; which was referred to the Committee on Armed Services

A BILL

To establish a task force of the Department of Defense
on mental health.

1 *Be it enacted by the Senate and House of Representa-*

2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. TASK FORCE OF THE DEPARTMENT OF DE-**

4 **FENSE ON MENTAL HEALTH.**

5 (a) ESTABLISHMENT.—The Secretary of Defense

6 shall establish a task force to examine matters relating

7 to the mental health of members of the Armed Forces.

8 (b) MEMBERSHIP.—

(2) NUMBER; COMPOSITION.—The Secretary shall appoint not more than 15 individuals to the task force in accordance with the following:

ees of the Department of Defense, or dependents of such members, including—

(i) an officer or employee of the De-

partment of Veterans Affairs; and

(ii) an officer or employee of the Sub-

stance Abuse and Mental Health Services

Administration of the Department of

Health and Human Services.

(C) DEADLINE.—The Secret

(C) DEADLINE.—The Secretary of Defense shall appoint all members not later than 90 days after the date of the enactment of this Act.

(D) Co-CHAIRS.—There shall be two co-chairs of the task force, one of whom shall be designated by the Secretary at the time of appointment from among the individuals appointed under subparagraph (A). The other co-chair shall be selected from among the members appointed under subparagraph (B) by members so appointed.

(c) ASSESSMENT AND RECOMMENDATIONS ON MEN-

22 TAL HEALTH SERVICES.—

23 (1) IN GENERAL.—Not later than 12 months
24 after the date on which all members of the task
25 force have been appointed, the task force shall sub-

1 mit to the Secretary a report containing an assess-
2 ment of, and recommendations for improving, the ef-
3 ficacy of mental health services provided to members
4 of the Armed Forces by the Department of Defense.

5 (2) UTILIZATION OF OTHER EFFORTS.—In pre-
6 paring the report, the task force shall take into con-
7 sideration completed and ongoing efforts by the Sec-
8 retary of Defense and the Secretary of Veterans Af-
9 fairs to improve the efficacy of mental health care
10 provided to members of the Armed Forces.

11 (3) ELEMENTS.—The assessment and rec-
12 ommendations (including recommendations for legis-
13 lative or administrative action) shall include meas-
14 ures to improve the following:

15 (A) The awareness of the potential for
16 mental health conditions of members of the
17 Armed Forces.

18 (B) The access to, and efficacy of, existing
19 programs (include telehealth programs) in pri-
20 mary care and mental health care to prevent,
21 identify, and treat mental health conditions of
22 members of the Armed Forces, including pro-
23 grams for—

24 (i) forward-deployed troops;

(ii) members of the reserve components; and

(iii) members assigned to remote or
austere duty locations.

14 (E) Analysis of the potential effect on ac-
15 cess and outcomes for members serving on ac-
16 tive duty as a result of proposed cuts to mili-
17 tary end strengths regarding members with
18 medical military occupational specialties.

(F) The access to and programs for family members of members of the Armed Forces, including family members overseas.

(G) Access to, and quality of, private mental health care received by members through TRICARE.

(H) The reduction or elimination of barriers to care, including the stigma associated with mental health conditions, by measures including enhanced confidentiality for members who seek care for such conditions.

(I) The awareness of mental health services available to dependents of members.

(J) The adequacy of outreach, education, and support programs on mental health matters for families of members.

(K) The early identification and treatment of mental health and substance abuse problems through the use of internal mass media communications (including radio, and television, social media) and other education tools to change attitudes within the Armed Forces regarding mental health and substance abuse treatment.

(L) The transition from mental health care furnished by the Secretary of Defense to such care furnished by the Secretary of Veterans Affairs.

(M) The availability of long-term follow-up and access to care for mental health conditions for members of the Individual Ready Reserve and the Selected Reserve and for discharged,

1 separated, or retired members of the Armed
2 Forces.

3 (N) Collaboration between agencies of the
4 Department of Defense with responsibility for,
5 or jurisdiction over, the provision of mental
6 health services.

7 (O) Coordination between the Department
8 of Defense and civilian communities, including
9 State, local, Tribal, and territorial governments,
10 and local support organizations, with respect to
11 mental health services.

12 (P) Coordination between the Department
13 of Defense and relevant Federal stakeholders,
14 including the Substance Abuse and Mental
15 Health Administration, National Institutes of
16 Health, and the Centers for Disease Control.

17 (Q) The scope and efficacy of curricula
18 and training on mental health matters for com-
19 manders in the Armed Forces.

20 (R) The efficiency and effectiveness of pre-
21 and post-deployment mental health screenings,
22 including mental health screenings for members
23 of the Armed Forces.

(S) The effectiveness of mental health programs provided in languages other than English.

(T) Tracking the use of behavioral health services and related outcomes, including wait times, continuity of care, symptom resolution, and maintenance of improvements resulting from treatment.

9 (U) Other matters the task force deter-
10 mines appropriate.

11 (d) ADMINISTRATIVE MATTERS.—

13 (e) REPORT.—

20 (B) the assessment and recommendations
21 required by subsection (c); and

22 (C) other matters that the task force de-
23 termines appropriate

1 (1), the Secretary shall submit to the Committees on
2 Armed Services, and on Veterans' Affairs, of the
3 Senate and the House of Representatives, a copy
4 such report. The Secretary may include in such sub-
5 mission comments on the report the Secretary deter-
6 mines appropriate.

7 (f) TERMINATION.—The task force shall terminate
8 90 days after the date on which the report of the task
9 force is submitted to Congress under subsection (e)(2).

10 (g) PLAN OF THE SECRETARY.—Not later than six
11 months after receipt of the report from the task force
12 under subsection (e), the Secretary of Defense shall de-
13 velop a plan based on the recommendations of the task
14 force and submit the plan to the congressional defense
15 committees.

16 (h) REPORTS BY THE SECRETARY.—For each of the
17 five years following the submission of the report from the
18 Department of Defense Task Force on Mental Health, the
19 Secretary of Defense shall submit to the congressional de-
20 fense committees a report on the recommendations made
21 by the Department of Defense Task Force on Mental
22 Health with respect to the Determinations. Department
23 of Defense. Each such report shall include—

1 (1) for each such recommendation, the deter-
2 mination of the Secretary of Defense whether to im-
3 plement the recommendation;

4 (2) in the case of a recommendation the Sec-
5 retary intends to implement, the intended timeline
6 for implementation, a description of any additional
7 resources or authorities required for such implemen-
8 tation, and the plan for such implementation;

9 (3) in the case of a recommendation the Sec-
10 retary determines is not advisable or feasible, the
11 analysis and justification of the Secretary in making
12 that determination; and

13 (4) in the case of a recommendation the Sec-
14 retary determines the Department is already imple-
15 menting, the analysis and justification of the Sec-
16 retary in making that determination.

17 (i) BRIEFINGS BY THE SECRETARY.—Not less than
18 once each of the five years following the submission of the
19 report, the Secretary of Defense shall provide to the con-
20 gressional defense committees a briefing on—

21 (1) the progress of the Secretary in analyzing
22 and implementing the recommendations made by the
23 task force;

- 1 (2) any programs, projects, or other activities of
2 the Department of Defense that are being carried
3 out to implement such recommendations; and
4 (3) the amount of funding provided for such
5 programs, projects, and activities.

○